



Legacy Giving Declaration of Future Intention

Thank you for your intention to include The Henry Ford in your estate plan. We ask that you complete this form with as much detail as you are willing to share. Any information about your gift will remain confidential.

This form does not constitute a legal obligation and does not legally bind you, your heirs or your estate. The Henry Ford understands that circumstances might change and that the size and nature of your eventual gift could be significantly different or not be possible. Should you need to change your gift, please let us know to update our records.

Name (print) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Recognition of Your Gift

For recognition purposes, please list my/our name(s) as follows:

- Please do not include my/our name(s) in any public listings of donors.
- New Intention** This is a new charitable estate gift to The Henry Ford.
- Update to Intention** This is an update to a previously recorded deferred gift to The Henry Ford.

Description and Value of Gift

Please indicate below (by checking applicable options) how your future gift intention will be fulfilled and provide the estimated value to The Henry Ford:

Description	Estimated Present-Day Value of Gift to The Henry Ford
<input type="checkbox"/> Will or Trust with sum of	
<input type="checkbox"/> Charitable Gift Annuity with sum of	
<input type="checkbox"/> Charitable Remainder Trust with sum of	
<input type="checkbox"/> Remainder of Retirement Fund/IRA with a current total of	
<input type="checkbox"/> Life Insurance Policy with a policy value at maturity of	



Estate Contact Information Although optional, this additional information assists The Henry Ford to ensure your gift's lasting impact.

Executor, Trustee (if your gift is through a will, trust):

Name (print) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Administrating Company (i.e., TIAA, Fidelity, etc., if your gift is through a retirement account or life insurance policy):

Name (print) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Additional Contact/Relationship you may want us to know (family, attorney, etc.):

Name (print) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

I/We understand that any details about my/our gift will remain confidential.

Signature(s) _____ Date _____

Print Name(s) _____

Please fill out and return this form together with any documentation that includes provisions for The Henry Ford to **giving@thehenryford.org** or by mail. Will and trust documentation only needs to include the part that names The Henry Ford.

Once documentation is received, you will be invited into the Clara Bryant Ford Legacy Giving Society.
Federal Tax ID #38-1359513